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DI (OHICIAI FULIII I) (1/00)									
		nkruptcy Iew Mexic		urt				Vol	luntary Petition
Name of Debtor (if individual, enter Last, First, Mic Reid, Porshea Clare	idle):			Name of Jo	oint Debto	or (Spou	ise) (Last, First,	Middle):	
All Other Names used by the Debtor in the last 8 ye (include married, maiden, and trade names): Porshea Clare Oxford	ars						e Joint Debtor in trade names)		8 years
Last four digits of Soc. Sec. or Individual-Taxpayer EIN (if more than one, state all): 5374	I.D. (ITIN)	No./Complete		Last four d EIN (if mo				axpayer I.	D. (ITIN) No./Complete
Street Address of Debtor (No. & Street, City, State 970 Valley Vista Rd.	& Zip Code):		Street Add	ress of Jo	int Deb	tor (No. & Stree	et, City, St	ate & Zip Code):
Anthony, NM	ZIPCODI	E 88021						Γ	ZIPCODE
County of Residence or of the Principal Place of Bu Dona Ana		00021		County of 1	Residence	e or of the	ne Principal Pla	ce of Busi	
Mailing Address of Debtor (if different from street a	address)			Mailing Ac	ldress of	Joint De	ebtor (if differen	at from str	eet address):
	ZIPCOD	 E						Γ	ZIPCODE
Location of Principal Assets of Business Debtor (if	different fro	m street address	abo	ve):					
								Γ	ZIPCODE
Type of Debtor (Form of Organization)		Nature o							Code Under Which (Check one box.)
(Check one box.) ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.)	☐ Sinş U.S ☐ Rail ☐ Stoo ☐ Con ☐ Clea	Health Care Business Single Asset Real Estate U.S.C. § 101(51B) Railroad Stockbroker Commodity Broker Clearing Bank Other		☐ Chapter 11 ☐ Chapter 12 ☑ Chapter 13		Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding Nature of Debts (Check one box.)			
	Title	Tax-Exer (Check box, otor is a tax-exen e 26 of the Unite rnal Revenue Co	if ap apt o ed Sta	plicable.) rganization		deb § 1 ind per	ots, defined in 1 01(8) as "incurrividual primaril sonal, family, od d purpose."	1 U.S.C. red by an y for a	Debts are primarily business debts.
Filing Fee (Check one be	ox)			Charles	L		Chapter 11 I	Debtors	
✓ Full Filing Fee attached ☐ Filing Fee to be paid in installments (Applicable attach signed application for the court's consideration is unable to pay fee except in installments. Rule 1	ation certifyi	ing that the debto		Debtor i Check if: Debtor's	s a small s not a sn s aggregat	nall busi	ness debtor as o	lefined in	U.S.C. § 101(51D). 11 U.S.C. § 101(51D). owed to non-insiders or
3A. □ Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. □ A plan is being filed with this petition □ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).						from one or more classes of			
Statistical/Administrative Information ✓ Debtor estimates that funds will be available for □ Debtor estimates that, after any exempt property distribution to unsecured creditors.				ors.					THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors 1-49 50-99 100-199 200-999 1,0 5,0	100- 100	5,001- 10,000	10,0 25,0		25,001- 50,000		50,001- 100,000	Over 100,000	
	000,001 to million			,000,001 to 0 million	\$100,00 to \$500		\$500,000,001 to \$1 billion	More that	
Estimated Liabilities So to \$50,001 to \$100,001 to \$500,001 to \$1, \$50,000 \$1,000,000 \$,000,001 to			\$500,000,001 to \$1 billion	More tha	

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B1 (Official Form 1) (1/08)		Page 2					
Voluntary Petition	Name of Debtor(s):						
(This page must be completed and filed in every case)	Reid, Porshea Clare						
Prior Bankruptcy Case Filed Within Last 8	Years (If more than two, attach	additional sheet)					
Location Where Filed: None	Case Number:	Date Filed:					
Location Where Filed:	Case Number:	Date Filed:					
Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If mor	re than one, attach additional sheet)					
Name of Debtor: None	Case Number:	Date Filed:					
District:	Relationship:	Judge:					
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) Exhibit A is attached and made a part of this petition. Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declar that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certif that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.							
	X /s/ Andrew Yarrington, E Signature of Attorney for Debtor(s)	Esq 3/31/10					
Yes, and Exhibit C is attached and made a part of this petition. No Exhi (To be completed by every individual debtor. If a joint petition is filed, ex	ach spouse must complete and atta-	ch a separate Exhibit D.)					
Exhibit D completed and signed by the debtor is attached and maIf this is a joint petition:Exhibit D also completed and signed by the joint debtor is attached							
Debtor has been domiciled or has had a residence, principal place of preceding the date of this petition or for a longer part of such 180	oplicable box.) of business, or principal assets in the days than in any other District.						
☐ There is a bankruptcy case concerning debtor's affiliate, general p ☐ Debtor is a debtor in a foreign proceeding and has its principal pl or has no principal place of business or assets in the United States I in this District, or the interests of the parties will be served in reg	ace of business or principal assets out is a defendant in an action or pro	in the United States in this District, occeding [in a federal or state court]					
Certification by a Debtor Who Reside (Check all app Landlord has a judgment against the debtor for possession of deb	licable boxes.)						
(Name of landlord or lesso	or that obtained judgment)						
(Address of lan	dlord or lessor)						
☐ Debtor claims that under applicable nonbankruptcy law, there are the entire monetary default that gave rise to the judgment for post							
Debtor has included in this petition the deposit with the court of filing of the petition.	any rent that would become due du	aring the 30-day period after the					
☐ Debtor certifies that he/she has served the Landlord with this cert	ification. (11 U.S.C. § 362(l)).						

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Reid, Porshea Clare

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Porshea Clare Reid Signature of Debtor

Porshea Clare Reid

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

March 31, 2010

Date

Х

Signature of Attorney*



Signature of Attorney for Debtor(s)

Andrew Yarrington, Esq 15673 Melwani Law P.C. 10749 Prospect NE, Ste, E Albuquerque, NM 87112

March 31, 2010

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Au	thorized Individual		
Printed Name o	f Authorized Individu	ıal	
Title of Authoria	zed Individual		

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- ☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

′	
	Signature of Foreign Representative
	Printed Name of Foreign Representative

Date

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

United States Bankruptcy Court District of New Mexico

IN DE.	Casa No
IN RE:	Case No
Reid, Porshea Clare Debtor(s)	Chapter <u>13</u>
EXHIBIT D - INDIVIDUAL DEBTOR'S CREDIT COUNSELIN	
Warning: You must be able to check truthfully one of the five stat do so, you are not eligible to file a bankruptcy case, and the court whatever filing fee you paid, and your creditors will be able to res and you file another bankruptcy case later, you may be required to to stop creditors' collection activities.	can dismiss any case you do file. If that happens, you will lose sume collection activities against you. If your case is dismissed
Every individual debtor must file this Exhibit D. If a joint petition is file one of the five statements below and attach any documents as directed	
✓ 1. Within the 180 days before the filing of my bankruptcy case , the United States trustee or bankruptcy administrator that outlined the performing a related budget analysis, and I have a certificate from the a certificate and a copy of any debt repayment plan developed through	e opportunities for available credit counseling and assisted me in agency describing the services provided to me. Attach a copy of the
2. Within the 180 days before the filing of my bankruptcy case , the United States trustee or bankruptcy administrator that outlined the performing a related budget analysis, but I do not have a certificate from a copy of a certificate from the agency describing the services provided the agency no later than 14 days after your bankruptcy case is filed.	e opportunities for available credit counseling and assisted me in m the agency describing the services provided to me. You must file
☐ 3. I certify that I requested credit counseling services from an approduce approach to the time I made my request, and the following exigent crequirement so I can file my bankruptcy case now. [Summarize exigent content of the co	circumstances merit a temporary waiver of the credit counseling
If your certification is satisfactory to the court, you must still obta you file your bankruptcy petition and promptly file a certificate from of any debt management plan developed through the agency. Failutease. Any extension of the 30-day deadline can be granted only for also be dismissed if the court is not satisfied with your reasons for counseling briefing.	m the agency that provided the counseling, together with a copy are to fulfill these requirements may result in dismissal of your cause and is limited to a maximum of 15 days. Your case may
4. I am not required to receive a credit counseling briefing because motion for determination by the court.]	of: [Check the applicable statement.] [Must be accompanied by a
·	reason of mental illness or mental deficiency so as to be incapable acial responsibilities.);
 Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically in participate in a credit counseling briefing in person, by telepho Active military duty in a military combat zone. 	mpaired to the extent of being unable, after reasonable effort, to one, or through the Internet.);
5. The United States trustee or bankruptcy administrator has detern does not apply in this district.	nined that the credit counseling requirement of 11 U.S.C. § 109(h)
I certify under penalty of perjury that the information provided a	above is true and correct.
Signature of Debtor: /s/ Porshea Clare Reid	
Date: March 31, 2010	

United States Bankruptcy Court District of New Mexico

IN RE:		Case No.
Reid, Porshea Clare		Chapter 13
	Debtor(s)	•

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 160,000.00		
B - Personal Property	Yes	3	\$ 31,065.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 295,149.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		\$ 24,222.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 4,950.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 3,690.00
	TOTAL	13	\$ 191,065.00	\$ 319,371.00	

United States Bankruptcy Court District of New Mexico

IN RE:	Case No
Reid, Porshea Clare	Chapter 13
Debtor(s) STATISTICAL SUMMARY OF CERTAIN LIABILIT	TIES AND RELATED DATA (28 U.S.C. § 159)
If you are an individual debtor whose debts are primarily consumer debts 101(8)), filing a case under chapter 7, 11 or 13, you must report all information of the control o	· · · · · · · · · · · · · · · · · · ·
Check this box if you are an individual debtor whose debts are NOT information here.	primarily consumer debts. You are not required to report any
This information is for statistical purposes only under 28 U.S.C. § 15	59.
Summarize the following types of liabilities, as reported in the Sched	ules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the following:

Average Income (from Schedule I, Line 16)	\$ 4,950.00
Average Expenses (from Schedule J, Line 18)	\$ 3,690.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C	
Line 20)	\$ 6,739.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 118,984.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 24,222.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 143,206.00

Case 1

(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Property legated at 11250 Deeder Way, Dane NV 90506 Value		Н	160,000.00	265,676.00
Property located at 11350 Deodar Way, Reno, NV 89506. Value based on bank appraisal from 2009.			100,000.00	203,070.00

TOTAL

160,000.00

(Report also on Summary of Schedules)

_ '	Case	N	

(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1.	Cash on hand.		Cash		0.00
2.	Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking and Savings at One Source Credit Union		400.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, include audio, video, and computer equipment.		Household Goods		200.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		Books, pictures, misc.		150.00
6.	Wearing apparel.		Clothing		250.00
7.	Furs and jewelry.		Jewelry		250.00
8.	Firearms and sports, photographic, and other hobby equipment.		Firearms: 1 pistol		150.00
9.	Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issue.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		401K from previous employment		6,000.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	Х			
14.	Interests in partnerships or joint ventures. Itemize.	X			

	TAT	
Case	NO	

(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.		Possible discrimination lawsuit against State of Nevada.		unknown
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and		1991 Utility Trailer		500.00
	other vehicles and accessories.		2001 GMC Sierra 3500 Mileage: 130K		7,000.00
			Condition: Good		
			2008 Nissan Titan SE King Cab long Bed Mileage: 35,500K Condtion: Good		16,165.00
26.	Boats, motors, and accessories.	Х			
	Aircraft and accessories.	Х			
28.	Office equipment, furnishings, and supplies.	Х			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			

	TAT	
Case	NO	

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
31.	Animals.	Х			
32.	Crops - growing or harvested. Give particulars.	Х			
33.	Farming equipment and implements.	X			
	Farm supplies, chemicals, and feed.	X			
	Other personal property of any kind not already listed. Itemize.	X			
			ТО	TAL	31,065.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

C	NT.	
Case	NO	

(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects	the exemptions	to which	debtor is	entitled	under:
(Check one box)	_				

Check if debtor claims a homestead exemption that exceeds \$136,875.

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
SCHEDULE A - REAL PROPERTY			
Property located at 11350 Deodar Way, Reno, NV 89506. Value based on bank appraisal from 2009.	11 USC § 522(d)(1)	1.00	160,000.00
SCHEDULE B - PERSONAL PROPERTY			
Checking and Savings at One Source Credit Union	11 USC § 522(d)(5)	400.00	400.00
Household Goods	11 USC § 522(d)(3)	200.00	200.00
Books, pictures, misc.	11 USC § 522(d)(3)	150.00	150.00
Clothing	11 USC § 522(d)(3)	250.00	250.00
Jewelry	11 USC § 522(d)(4)	250.00	250.00
Firearms: 1 pistol	11 USC § 522(d)(3)	150.00	150.00
401K from previous employment	11 USC § 522(d)(12)	6,000.00	6,000.00
1991 Utility Trailer	11 USC § 522(d)(5)	500.00	500.00
2001 GMC Sierra 3500 Mileage: 130K	11 USC § 522(d)(2) 11 USC § 522(d)(5)	2,725.00 175.00	7,000.00
Condition: Good	11 USC § 522(d)(5)	4,100.00	

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. XXXX			9/2007. Auto loan secured by 2008	T			29,473.00	13,308.00
Frontier Financial Credit Union PO Box 70099 Reno, NV 89502			Nissan Titan.					
		Ī	VALUE \$ 16,165.00	1				
ACCOUNT NO. XXXX			12/2007. Mortgage on property located at				265,676.00	105,676.00
Wells Fargo Home Mortgage PO Box 11701 Newark, NJ 07101-4701			11350 Deodar Way, Reno NV					
			VALUE \$ 160,000.00	╙				
ACCOUNT NO.								
			VALUE \$					
ACCOUNT NO.								
			VALUE \$					
0 continuation sheets attached			(Total of th	Sub			\$ 295,149.00	\$ 118,984.00
			(Use only on la	,	Γot	al	\$ 295,149.00	\$ 118,984.00
							Ø . 1	(TC 1: 1.1

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(Report also on Summary of Schedules.) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

0 continuation sheets attached

Debtor(s)

Case No. _____(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Statistical Summary of Certain Liabilities and Related Data.
Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).
* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

P/E	(Official	Form	(F)	(12/07)

IN RE Reid, Porshea Clare

Debtor(s)		

(If known)

Case No.

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	VISTOITE	AMOUNT OF CLAIM
ACCOUNT NO.			12/2009.			1	
Caris Diagnostic 1700 Curia Drive, Ste. 5000 El Paso, TX 79902							670.00
ACCOUNT NO. XXXX			1/1999. Revolving credit purchases.			T	
Citicards PO Box 6000 The Lakes, NV 89163-6000							13,086.00
ACCOUNT NO.			12/2009. Medical expenses.			T	<u> </u>
Duane Rigel, CNP 1300 Murchinson Drive El Paso, TX 79902							105.00
ACCOUNT NO.			12/2009. Medical expenses.			T	
Endoscscopy Ctr Of El Paso 1300 Murchison Drive El Paso, TX 79902							570.00
4					otal		
1 continuation sheets attached			(Total of thi	-	age) otal	\$	14,431.00
			(Use only on last page of the completed Schedule F. Report	also	on		
			the Summary of Schedules and, if applicable, on the Sta Summary of Certain Liabilities and Related			\$	

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Case	N	\sim
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(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.	1		2009. Medical expenses.	П		H	
Mark Cossentino, MD 1700 Curie Drive, Ste. 5000 El Paso, TX 79902							300.00
ACCOUNT NO. XXXX	Х		6/1994. Revolving credit purchases.	H		H	300.00
MBNA PO Box 17054 Wilmington, DE 19850			o, 1994. Revolving dream paromases.				7,642.00
ACCOUNT NO.			Assignee or other notification for:	Н		H	7,012.00
FIA Card Services PO Box 15028 Wilmington, DE 19850-5028			MBNA				
ACCOUNT NO.			7/2008. Personal Ioan.	H		H	
Nancy Granato 1700 Wild Basin Lodge Austin, TX 78746							1,500.00
ACCOUNT NO. XXXX			12/2002. Utilties.	H		\dashv	1,300.00
Verizon Wireless PO Box 26055 Minneapolis, MN 55246							240.00
ACCOUNT NO.							349.00
ACCOUNT NO.							
Sheet no1 of1 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th	Sub is p			\$ 9,791.00
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate	t als	tica	n al	\$ 24,222.00

United States Bankruptcy Court District of New Mexico

IN RE:		Case No.
Reid, Porshea Clare		Chapter 13
	Debtor(s)	
	VERIFICATION OF CREDITOR M	IATRIX
The above named debtor(s) he	ereby verify(ies) that the attached matrix listing cre	editors is true to the best of my(our) knowledge.
Date: March 31, 2010	Signature: /s/ Porshea Clare Reid	
	Porshea Clare Reid	Debtor
Date:	Signature:	
	<u> </u>	Ioint Debtor if any

R6G	(Official	Form	6G)	(12/07)

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Case No.

(If known)

Debtor(s)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTER STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.			
T-Mobile PO Box 66052 Dallas, TX 75266-0252	Two-year mobile phone contract. Debtor will assume.			

R6H	(Official	Form	6H)	(12/07)

TN	J	R	F	R	eic	1 1	20	rsł	าคล	CI	are
	•	-11	٠,	-11	CIL	4. I	- 0	ıəı	ıca	•	aıc

_ Case No	
	(If known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Reid, Michael Shane 970 Valley Vista Rd. Anthony, NM 88021	(nondebtor spouse)
David Oxford Address Unknown	MBNA PO Box 17054 Wilmington, DE 19850

Case No.

(If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

Debtor's Marital Status	3	DEPENDENTS OF	DEBTOR AND	SPOU	SE	
Married		RELATIONSHIP(S):				AGE(S):
EMPLOYMENT:		DEBTOR			SPOUSE	
Occupation	Medical Dosi	metrist				
Name of Employer	Las Palmas M	Medical Center				
How long employed	6 months					
Address of Employer	1801 N. Oreg					
	El Paso, TX	79902				
INCOME: (Estim	ate of average o	r projected monthly income at time case filed)			DEBTOR	SPOUS
	_	alary, and commissions (prorate if not paid month	hly)	\$	6,739.00	\$
2. Estimated month		, , , , , , , , , , , , , , , , , , ,	37	\$		\$
3. SUBTOTAL	•			\$	6,739.00	\$
4. LESS PAYROL	L DEDUCTION	NS		· —	3,100100	
a. Payroll taxes a				\$	1,347.00	\$
b. Insurance		•		\$		\$
c. Union dues				\$		\$
d. Other (specify) <u>401(K)</u>			\$	202.00	\$
				\$		\$
5. SUBTOTAL O	F PAYROLL I	DEDUCTIONS		\$	1,789.00	\$
6. TOTAL NET N	MONTHLY TA	KE HOME PAY		\$	4,950.00	\$
7. Regular income	from operation	of business or profession or farm (attach detailed	l statement)	\$		\$
8. Income from rea		or submess of profession of furni (under detailed	· statement)	\$		\$
9. Interest and divi				\$		\$ \$ \$
10. Alimony, main	tenance or supp	ort payments payable to the debtor for the debtor	s's use or			
that of dependents				\$		\$
11. Social Security						
(Specify)				\$		\$
10.5	. •			\$		\$
12. Pension or retin				\$		\$
13. Other monthly				Ф		¢
(Specify)				φ —		φ
				\$ ——		\$
14. SUBTOTAL (OF LINES 7 TI	HROUGH 13		\$		\$
15. AVERAGE M	ONTHLY INC	COME (Add amounts shown on lines 6 and 14)		\$	4,950.00	\$
16 COMRINED	AVERACE MA	ONTHLY INCOME: (Combine column totals f	rom line 15.			
		otal reported on line 15)	rom mie 13,		\$	4,950.00
						edules and, if applicable, on iabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **None**

	IN	\mathbf{RE}	Reid.	Porshea	Clar
--	----	---------------	-------	----------------	------

Debtor(s)

Case No.	
	(If known)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly,
quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed
on Form22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,200.00
a. Are real estate taxes included? Yes No		•
b. Is property insurance included? Yes No		
2. Utilities:		
a. Electricity and heating fuel	\$	160.00
b. Water and sewer	\$	
c. Telephone	\$	100.00
d. Other Internet	\$	45.00
Trash	\$	30.00
3. Home maintenance (repairs and upkeep)		
4. Food	\$	750.00
5. Clothing	\$	175.00
6. Laundry and dry cleaning	\$	80.00
7. Medical and dental expenses	\$	125.00
8. Transportation (not including car payments)	\$	250.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	175.00
10. Charitable contributions	\$	45.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	
b. Life	\$	
c. Health	\$	
d. Auto	\$	130.00
e. Other	\$	
	\$	
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	
	\$	
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	
b. Other	\$	
	\$	
14. Alimony, maintenance, and support paid to others	\$	200.00
15. Payments for support of additional dependents not living at your home	\$	
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	
17. Other Food AWay From Home	\$	75.00
Contingency Fund	\$	150.00
	\$	
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if		
applicable on the Statistical Summary of Cartain Liabilities and Palated Data	Q	3 600 00

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document: **None**

20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$
b. Average monthly expenses from Line 18 above	\$

c. Monthly net income (a. minus b.)

١.

Debtor(s)

(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _ 15 sheets, and that they are

true and correct to the best of my know	wledge, infor	nation, and belief.
Date: March 31, 2010	_ Signature	: /s/ Porshea Clare Reid
		Porshea Clare Reid Debtor
Date:	_ Signature	(Joint Debtor, if any)
		[If joint case, both spouses must sign.]
DECLARATION AND SIGNA	ATURE OF NO	ON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)
compensation and have provided the debte and 342 (b); and, (3) if rules or guideline	or with a copy or s have been properties the debtor not	kruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), omulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by ice of the maximum amount before preparing any document for filing for a debtor or accepting
Printed or Typed Name and Title, if any, of Ban	kruptcy Petition	Preparer Social Security No. (Required by 11 U.S.C. § 110.)
	an individual,	state the name, title (if any), address, and social security number of the officer, principal,
Address		
Signature of Bankruptcy Petition Preparer		Date
Names and Social Security numbers of all of is not an individual:	other individua	ls who prepared or assisted in preparing this document, unless the bankruptcy petition preparer
If more than one person prepared this doc	cument, attach	additional signed sheets conforming to the appropriate Official Form for each person.
A bankruptcy petition preparer's failure to imprisonment or both. 11 U.S.C. § 110; 1		he provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or 6.
DECLARATION UNDER	PENALTY	OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP
I, the		(the president or other officer or an authorized agent of the corporation or a
	debtor in thi	of thes case, declare under penalty of perjury that I have read the foregoing summary and own on summary page plus 1), and that they are true and correct to the best of my
Date:	_ Signature	;
		(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court District of New Mexico

IN RE:	Case No
Reid, Porshea Clare	Chapter 13
Debtor(s)	
STATEMENT OF FIN	NANCIAL AFFAIRS
This statement is to be completed by every debtor. Spouses filing a joint pet is combined. If the case is filed under chapter 12 or chapter 13, a married debt is filed, unless the spouses are separated and a joint petition is not filed. An farmer, or self-employed professional, should provide the information request personal affairs. To indicate payments, transfers and the like to minor childror guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disc	or must furnish information for both spouses whether or not a joint petition individual debtor engaged in business as a sole proprietor, partner, family ed on this statement concerning all such activities as well as the individual's ren, state the child's initials and the name and address of the child's parent
Questions 1 - 18 are to be completed by all debtors. Debtors that are or ha 25. If the answer to an applicable question is "None," mark the box labe use and attach a separate sheet properly identified with the case name, case r	eled "None." If additional space is needed for the answer to any question,
DEFINIT	TIONS
"In business." A debtor is "in business" for the purpose of this form if the d for the purpose of this form if the debtor is or has been, within six years imm an officer, director, managing executive, or owner of 5 percent or more of the partner, of a partnership; a sole proprietor or self-employed full-time or part-t form if the debtor engages in a trade, business, or other activity, other than as a "Insider." The term "insider" includes but is not limited to: relatives of the which the debtor is an officer, director, or person in control; officers, director a corporate debtor and their relatives; affiliates of the debtor and insiders of	rediately preceding the filing of this bankruptcy case, any of the following: evoting or equity securities of a corporation; a partner, other than a limited time. An individual debtor also may be "in business" for the purpose of this an employee, to supplement income from the debtor's primary employment. The debtor; general partners of the debtor and their relatives; corporations of rs, and any owner of 5 percent or more of the voting or equity securities of
1. Income from employment or operation of business	
including part-time activities either as an employee or in independent case was commenced. State also the gross amounts received during maintains, or has maintained, financial records on the basis of a fisci beginning and ending dates of the debtor's fiscal year.) If a joint petitic	trade or business, from the beginning of this calendar year to the date this the two years immediately preceding this calendar year. (A debtor that all rather than a calendar year may report fiscal year income. Identify the on is filed, state income for each spouse separately. (Married debtors filing ether or not a joint petition is filed, unless the spouses are separated and a
AMOUNT SOURCE	
13,389.00 2010 YTD Income from Employment	
118,573.00 2009	
120,399.00 2008	
2. Income other than from employment or operation of business	
two years immediately preceding the commencement of this case. C	aployment, trade, profession, operation of the debtor's business during the Give particulars. If a joint petition is filed, state income for each spouse t state income for each spouse whether or not a joint petition is filed, unless
3. Payments to creditors Complete a. or b., as appropriate, and c.	
debts to any creditor made within 90 days immediately preceding the constitutes or is affected by such transfer is less than \$600. Indicate we a domestic support obligation or as part of an alternative repaymen	I payments on loans, installment purchases of goods or services, and other commencement of this case unless the aggregate value of all property that ith an asterisk (*) any payments that were made to a creditor on account of t schedule under a plan by an approved nonprofit budgeting and credit r 13 must include payments by either or both spouses whether or not a joint s not filed.)
	AMOUNT AMOUNT

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS

PAID STILL OWING

Only
orms Software
Œ,
[1-800-998-2424]
5
© 1993-2010 EZ-Filing,

	o, NV 89502	
None	b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 9 preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counselidebtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or is filed, unless the spouses are separated and a joint petition is not filed.)	transfer is less than f a domestic support ng agency. (Married
None	c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spora joint petition is filed, unless the spouses are separated and a joint petition is not filed.)	
	AMOUNT ATIONSHIP TO DEBTOR DATE OF PAYMENT PAID 0.00	AMOUNT STILL OWING 0.00
4. Su	its and administrative proceedings, executions, garnishments and attachments	
None	a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately precede bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)	
None	b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year im the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)	
5. Re	possessions, foreclosures and returns	
None	List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of forect the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses joint petition is not filed.)	2 or chapter 13 must
6. As	signments and receiverships	
None	a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commer (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a junless the spouses are separated and joint petition is not filed.)	
None	b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immed commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning prop spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)	
7. Gi	îts	
None	List all gifts or charitable contributions made within one year immediately preceding the commencement of this case exceptifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregate per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both special joint petition is filed, unless the spouses are separated and a joint petition is not filed.)	gating less than \$100
8. Lo	sses	
None	List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of the commencement of this case . (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spot a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)	
9. Pa	yments related to debt counseling or bankruptcy	
None	List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultate consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding of this case.	

NAME AND ADDRESS OF PAYEE Melwani Law P.C. 10749 Prospect NE, Ste. F Albuquerque, NM 87112

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR Prior to filing

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

DATES OF OCCUPANCY

9/2007-6/2009

9/2006-9/2007

4/2006-9/2006

10. O	ther transfers		
None	a. List all other property, other than property trans absolutely or as security within two years immed chapter 13 must include transfers by either or bot petition is not filed.)	diately preceding the commencement of this case	se. (Married debtors filing under chapter 12 o
	IE AND ADDRESS OF TRANSFEREE, ATIONSHIP TO DEBTOR	DATE 2006	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED Property located at 6720 Windrift Way, Austin, TX 78745-3880.
Frier	nd		
None	b. List all property transferred by the debtor within device of which the debtor is a beneficiary.	ten years immediately preceding the commence	ment of this case to a self-settled trust or simila
11. C	Closed financial accounts		
None	List all financial accounts and instruments held in transferred within one year immediately preced certificates of deposit, or other instruments; share brokerage houses and other financial institutions accounts or instruments held by or for either or b petition is not filed.)	ing the commencement of this case. Include cles and share accounts held in banks, credit union. (Married debtors filing under chapter 12 or ch	hecking, savings, or other financial accounts ons, pension funds, cooperatives, associations apter 13 must include information concerning
	IE AND ADDRESS OF INSTITUTION tier Financial	TYPE AND NUMBER OF ACCOUNT AND AMOUNT OF FINAL BALANCE Checking	AMOUNT AND DATE OF SALE OR CLOSING \$80.00/2/2010
12. S	afe deposit boxes		
None	List each safe deposit or other box or depository is preceding the commencement of this case. (Marriboth spouses whether or not a joint petition is file	ed debtors filing under chapter 12 or chapter 13	must include boxes or depositories of either o
13. S	etoffs		
None	List all setoffs made by any creditor, including a b case. (Married debtors filing under chapter 12 or petition is filed, unless the spouses are separated	chapter 13 must include information concernin	
14. P	roperty held for another person		
None	List all property owned by another person that the	e debtor holds or controls.	
	IE AND ADDRESS OF OWNER pand's Relative	DESCRIPTION AND VALUE OF PROPE Fifth Wheel Trailer	ERTY LOCATION OF PROPERTY 970 Valley Vista Rd., Anthony, NM 88021. Debtor is renting land.
15. P	rior address of debtor		
None	If debtor has moved within three years immediate that period and vacated prior to the commencement		
1 I	that below and vacated brior to the commenceme	chi of this case. If a joint defition is filed, report	also any separate address of either shouse.

97005-2544 16. Spouses and Former Spouses

11350 Deodar Way, Reno, NM 89506-9057

73990 Neer City Rd., Rainier, OR 97048-3205

4555 SW 1422nd Avenue, Apt. 159, Beaverton. OR Same

ADDRESS

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana,

NAME USED

Same

Same

Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

 \checkmark

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

 \checkmark

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: March 31, 2010	Signature /s/ Porshea Clare Reid	
	of Debtor	Porshea Clare Reid
Date:	Signature of Joint Debtor	
	(if any)	
	0 continuation pages attached	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

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B22C (Official Form 22C) (Chapter 13) (01/08)	According to the calculations required by this statement:
	☐ The applicable commitment period is 3 years.
In re: Reid, Porshea Clare	✓ The applicable commitment period is 5 years.
Debtor(s)	✓ Disposable income is determined under § 1325(b)(3).
Case Number:	☐ Disposable income is not determined under § 1325(b)(3).
, ,	(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. REPORT OF INCOME							
	a. [ital/filing status. Check the box that applies and of Unmarried. Complete only Column A ("Debty Married. Complete both Column A ("Debtor")	tor's Income") for Lines 2-10.					
1	the si	igures must reflect average monthly income receiving calendar months prior to filing the bankruptcy of the before the filing. If the amount of monthly income divide the six-month total by six, and enter the re	case, ending on the last day of the me varied during the six months, you		Column A Debtor's Income	Column B Spouse's Income		
2	Gros	ss wages, salary, tips, bonuses, overtime, comm	issions.	\$	6,739.00	\$		
3	a and one b attac	me from the operation of a business, profession d enter the difference in the appropriate column(s) business, profession or farm, enter aggregate numb hment. Do not enter a number less than zero. Do not enses entered on Line b as a deduction in Part I	of Line 3. If you operate more than bers and provide details on an not include any part of the business					
	a.	Gross receipts	\$					
	b.	Ordinary and necessary operating expenses	\$					
	c.	Business income	Subtract Line b from Line a	\$		\$		
4	diffe		not enter a number less than zero. Do red on Line b as a deduction in					
	a.	Gross receipts	\$					
	b.	Ordinary and necessary operating expenses	\$					
	c.	Rent and other real property income	Subtract Line b from Line a	\$		\$		
5	Inte	rest, dividends, and royalties.		\$		\$		
6	Pens	sion and retirement income.		\$		\$		
7	expe that	amounts paid by another person or entity, on a sussess of the debtor or the debtor's dependents, in purpose. Do not include alimony or separate main the debtor's spouse.	including child support paid for	\$		\$		

 - (Official Form 220) (Chapter 13) (01/0	,0)						
8	Unemployment compensation. Enter However, if you contend that unemploy was a benefit under the Social Security Column A or B, but instead state the ar	yment compensation receive Act, do not list the amount	ed by you	or your spous	se			
	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$	Spouse S	\$	\ \ \ \ \ \ \		\$	
9	Income from all other sources. Specisources on a separate page. Total and emaintenance payments paid by your or separate maintenance. Do not incl. Act or payments received as a victim of international or domestic terrorism. a. b.	enter on Line 9. Do not inc spouse, but include all ot ude any benefits received u	lude alim her paym ander the S	ony or separa nents of alimo Social Security	ony y		\$	
10	Subtotal. Add Lines 2 thru 9 in Column through 9 in Column B. Enter the total	(s).			\$ 6,	,739.00	\$	
11	Total. If Column B has been completed and enter the total. If Column B has no Column A.				\$			6,739.00
	Part II. CALCUL	ATION OF § 1325(b)(4) COM	MITMENT 1	PERIOD			
12	Enter the amount from Line 11.						\$	6,739.00
13	Marital Adjustment. If you are married that calculation of the commitment per your spouse, enter the amount of the in basis for the household expenses of your a. b. c. Total and enter on Line 13.	iod under § 1325(b)(4) doe come listed in Line 10, Col	s not requ	aire inclusion of at was NOT p	of the income	e of llar	\$	0.00
14	Subtract Line 13 from Line 12 and e	nter the result.					\$	6,739.00
15	Annualized current monthly income 12 and enter the result.		the amou	ant from Line	14 by the nur	nber	\$	80,868.00
16	Applicable median family income. En household size. (This information is avenue bankruptcy court.)	ailable by family size at wy	ww.usdoj.	gov/ust/ or fro	om the clerk o		Φ.	
	a. Enter debtor's state of residence: Ne		_	er debtor's hou	isehold size:	_3	\$	50,457.00
17	Application of § 1325(b)(4). Check th ☐ The amount on Line 15 is less that 3 years" at the top of page 1 of thi ☐ The amount on Line 15 is not less period is 5 years" at the top of page	an the amount on Line 16 s statement and continue w s than the amount on Lin	. Check the this state the character character the character that the character the character than the chara	ne box for "Thatement. ck the box for	"The applica			
	Part III. APPLICATION OF	§ 1325(b)(3) FOR DE	ΓERMIN	NING DISPO	OSABLE II	NCOM	1E	
18	Enter the amount from Line 11.						\$	6.739.00

	Marital adjustment If you are mare							
19	Marital adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.							
	a. \$							
	b.				\$			
	c.				\$			
	Total and enter on Line 19.			·		\$	0.00	
20	Current monthly income for § 132	5(b)(3). Subtract	Line 1	9 from Line 18 and enter the	result.	\$	6,739.00	
21	Annualized current monthly incom 12 and enter the result.	ne for § 1325(b)((3). Mu	lltiply the amount from Line 2	0 by the number	\$	80,868.00	
22	Applicable median family income.	Enter the amount	t from l	Line 16.		\$	50,457.00	
23	Application of § 1325(b)(3). Check ✓ The amount on Line 21 is more under § 1325(b)(3)" at the top of ☐ The amount on Line 21 is not not determined under § 1325(b)(3)" complete Parts IV, V, or VI.	than the amount page 1 of this standard than the ar	nt on I atemen	Line 22. Check the box for "E t and complete the remaining on Line 22. Check the box for	parts of this stater r "Disposable inco	nent. ome is	s not	
	Part IV. CALCULAT	TION OF DED	UCTI	ONS ALLOWED LINDE	D 8 707(L)(3)			
	Subpart A: Deduct	ions under Stan		of the Internal Revenue Ser				
24A	Subpart A: Deduct National Standards: food, apparel miscellaneous. Enter in Line 24A the Expenses for the applicable household the clerk of the bankruptcy court.)	and services, ho	dards ousekee	of the Internal Revenue Ser eping supplies, personal car IRS National Standards for A	vice (IRS) e, and llowable Living	\$	1,152.00	
24A 24B	National Standards: food, apparel miscellaneous. Enter in Line 24A the Expenses for the applicable household	and services, hoe "Total" amount d size. (This informater in Line a1 beans under 65 years of age of the bankruptours of age, and en older. (The total iply Line a1 by Lult in Line c1. Mud enter the result	dards ousekee from l ormatio elow the s of age e or old cy cour tter in I l numb ine b1 ultiply	eping supplies, personal care IRS National Standards for A on is available at www.usdoj.go ne amount from IRS National e, and in Line a2 the IRS National et.) Enter in Line b1 the number of household members muto obtain a total amount for half Line a2 by Line b2 to obtain a	vice (IRS) e, and llowable Living ov/ust/ or from Standards for onal Standards for able at er of members of rs of your st be the same as ousehold a total amount for	<u> </u>	1,152.00	
	National Standards: food, apparel miscellaneous. Enter in Line 24A the Expenses for the applicable household the clerk of the bankruptcy court.) National Standards: health care. E Out-of-Pocket Health Care for person www.usdoj.gov/ust/ or from the clerk your household who are under 65 year household who are 65 years of age of the number stated in Line 16b.) Mult members under 65, and enter the result household members 65 and older, an	and services, hoe "Total" amount de size. (This informater in Line a1 beans under 65 years of ago of the bankrupter of age, and entroller. (The total iply Line a1 by Lult in Line c1. Mud enter the result ult in Line 24B.	dards ousekee from l ormatio elow the s of age e or old cy coun tter in I l numb ine b1 ultiply in Line	eping supplies, personal care IRS National Standards for A on is available at www.usdoj.go ne amount from IRS National e, and in Line a2 the IRS National et.) Enter in Line b1 the number of household members muto obtain a total amount for half Line a2 by Line b2 to obtain a	vice (IRS) e, and llowable Living ov/ust/ or from Standards for onal Standards for able at er of members of rs of your st be the same as ousehold a total amount for obtain a total	<u> </u>	1,152.00	
	National Standards: food, apparel miscellaneous. Enter in Line 24A the Expenses for the applicable household the clerk of the bankruptcy court.) National Standards: health care. E Out-of-Pocket Health Care for person www.usdoj.gov/ust/ or from the clerk your household who are under 65 year household who are 65 years of age of the number stated in Line 16b.) Multi members under 65, and enter the result household members 65 and older, and health care amount, and enter the result.	and services, hoe "Total" amount de size. (This informater in Line a1 beans under 65 years of ago of the bankrupter of age, and entroller. (The total iply Line a1 by Lult in Line c1. Mud enter the result ult in Line 24B.	dards ousekee from l ormatio elow the s of age e or old cy coun tter in I l numb ine b1 ultiply in Line	of the Internal Revenue Ser eping supplies, personal car IRS National Standards for A on is available at www.usdoj.go ne amount from IRS National e, and in Line a2 the IRS Nati- der. (This information is avail et.) Enter in Line b1 the numb Line b2 the number of member er of household members mu to obtain a total amount for he Line a2 by Line b2 to obtain a e c2. Add Lines c1 and c2 to o	vice (IRS) e, and llowable Living ov/ust/ or from Standards for onal Standards for able at er of members of rs of your st be the same as ousehold a total amount for obtain a total	<u> </u>	1,152.00	
	National Standards: food, apparel miscellaneous. Enter in Line 24A the Expenses for the applicable household the clerk of the bankruptcy court.) National Standards: health care. E Out-of-Pocket Health Care for person Out-of-Pocket Health Care for person www.usdoj.gov/ust/ or from the clerk your household who are under 65 year household who are 65 years of age of the number stated in Line 16b.) Mult members under 65, and enter the result household members 65 and older, and health care amount, and enter the result Household members under 65 years.	and services, hoe "Total" amount de size. (This information of the size of age of the bankrupters of age, and entroller. (The total iply Line all by Lult in Line c1. Mud enter the result ult in Line 24B.	dards buseked from l branchio elow the s of age e or old cy cour tter in I l numb ine b1 in Lind Hou	of the Internal Revenue Ser eping supplies, personal car IRS National Standards for A on is available at www.usdoj.go ne amount from IRS National e, and in Line a2 the IRS Nati- der. (This information is avail et.) Enter in Line b1 the numb Line b2 the number of member er of household members mu to obtain a total amount for he Line a2 by Line b2 to obtain a e c2. Add Lines c1 and c2 to observed.	vice (IRS) e, and llowable Living ov/ust/ or from Standards for onal Standards for able at er of members of rs of your st be the same as ousehold a total amount for obtain a total	<u> </u>	1,152.00	

Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. 1	D2	220 (1	Officia	al Form 22C) (Chapter 13) (01/08)					
Local Standards: transportation; vehicle operation/public transportation expense. S 1,076.00			the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.						
Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses are included as a contribution to your household expenses in Line 7. O	2	25B							
Local Standards: housing and utilities: adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses are included as a contribution to your household expenses in Line 7. O			b.		\$				
Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. 1			c.	Net mortgage/rental expense	Subtract Line b from Line a	\$	1,076.00		
Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. 0		26	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis						
an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation; additional public transportation expenses. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation, and you contend that you are entitled to an additional deduction for your public transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs \$\$ 496.00 Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line b from Line a stated in Line b from Line a form Line a subtract Line b from Line						\$			
expenses are included as a contribution to your household expenses in Line 7. 0 1 2 or more.			an ex	spense allowance in this category regardless of whether you pay the ex					
If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs \$ 496.00 Average Monthly Payment for any debts secured by Vehicle 1, as b. stated in Line 47 \$ Subtract Line b from Line a Subtract Line b from Line			Check the number of vehicles for which you pay the operating expenses or for which the operating						
Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) 1 Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) 1 Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1 1 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at https://www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. 28 Average Monthly Payment for any debts secured by Vehicle 1, as betted in Line 47; subtract Line b from Line and enter the result in Line 28. Do not enter an amount less than zero. 29 Average Monthly Payment for any debts secured by Vehicle 1, as betted in Line 47; subtract Line b from Line a stated in Line 47. 20 Net ownership/dease expense for Vehicle 1. 21 Subtract Line b from Line a stated in Line 47; subtract Line b from Line a stated in Line 47. 20 Net ownership/dease expense for Vehicle 1. 21 Subtract Line b from Line a stated in Line 47.	2	27A	$\square 0$	\square 1 \square 2 or more.					
Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs \$ 496.00 Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 Subtract Line b from Line a Subtract Line b from Line a stated in Line 47 Subtract Line b from Line a from Line a Subtract Line b from Line a subtract Line b from Line a stated in Line 47			Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk						
which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs \$ 496.00 Average Monthly Payment for any debts secured by Vehicle 1, as b. stated in Line 47 \$ 491.22	2	27B	Loca exper addit Trans	al Standards: transportation; additional public transportation expenses for a vehicle and also use public transportation, and you contend tional deduction for your public transportation expenses, enter on Line sportation" amount from IRS Local Standards: Transportation. (This a	that you are entitled to an 27B the "Public"				
Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 1, as b. stated in Line 47 Subtract Line b from Line a 491.22			whic than	h you claim an ownership/lease expense. (You may not claim an owne two vehicles.)					
Average Monthly Payment for any debts secured by Vehicle 1, as b. stated in Line 47 \$ 491.22		28	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47;						
b. stated in Line 47 \$ 491.22			a.	IRS Transportation Standards, Ownership Costs	\$ 496.00				
c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a \$			b.		\$ 491.22				
			c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a	\$	4.78		

		al Standards: transportation ownership/lease expense; Vehicle 2. 0 ked the "2 or more" Box in Line 28.	Complete this Line only if you		
29	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.				
	a.	IRS Transportation Standards, Ownership Costs	\$ 496.00		
	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$		
	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a	\$	496.00
30	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self-employment taxes, social-security taxes, and Medicare taxes. Do not include real estate or sales taxes.				1,347.00
31	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.			\$	
32	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.				
33	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 49.			\$	200.00
34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.			\$	
35	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.			\$	
36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.			\$	
37	you a servi nece	er Necessary Expenses: telecommunication services. Enter the total actually pay for telecommunication services other than your basic hon ice—such as pagers, call waiting, caller id, special long distance, or in assary for your health and welfare or that of your dependents. Do not inceed.	ne telephone and cell phone ternet service—to the extent	\$	46.00
38	_	al Expenses Allowed under IRS Standards. Enter the total of Lines	24 through 37	\$	5,404.78

Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 24-37 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. Health Insurance 240.00 \$ Disability Insurance 39 \$ **Health Savings Account** Total and enter on Line 39 240.00 If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an 40 elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. \$ **Protection against family violence.** Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and 41 Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. \$ Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must 42 provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. \$ Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or 43 secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. \$ Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at 44 www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. \$ Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined 45 in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income. \$ 46 Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45. 240.00

		S	Subpart C	: Deductions for Del	ot Payn	nent				
47	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.									
		Name of Creditor Property		Average Monthly ty Securing the Debt Payment			includ	s payment e taxes or nsurance?		
	a.	Frontier Financial Credit Un	Automo	obile (1)	\$	491.22	☐ yes 🗹 no	s 🗹 no		
	b.				\$		☐ yes	s 🗌 no		
	c.				\$		☐ yes	s 🗌 no		
	Total: Add lines a, b and c.						\$	491.22		
48	Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.									
		Name of Creditor		Property Securing the Debt				Oth of the e Amount		
	a.			\$						
	b.			\$			\$			
	c.			\$			\$			
				Total: Add lines a, b and c.				a, b and c.	\$	
49	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33.						\$			
	Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.									
	a.	Projected average monthly Cha	apter 13 p	lan payment.	\$					
50	b.	Current multiplier for your district as de schedules issued by the Executive Office Trustees. (This information is available www.usdoj.gov/ust/ or from the clerk of court.)		e for United States						
	c. Average monthly administrative expense case			of Chapter 13 Total: Multiply Lines a and b			nes a		\$	
51	Tota	l Deductions for Debt Payment. Er	nter the to	tal of Lines 47 through	n 50.				\$	491.22
		-		: Total Deductions fr		come			1	
52	Tota	al of all deductions from income	e. Enter th	e total of Lines 38, 46	, and 51	1.			\$	6,136.00

		Part V. DETERMINATION OF DISPOSABLE INCOME UNDER	2 § 1325(b)(2)			
53	Tota	al current monthly income. Enter the amount from Line 20.		\$	6,739.00	
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.					
55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from retirement plans, as specified in § 362(b)(19).					
56	Tota	al of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.		\$	6,136.00	
	Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expenses necessary and reasonable.					
57		Nature of special circumstances	Amount of expense			
	a.		\$			
	b.		\$			
	c.		\$			
	Total: Add Lines a, b, and c					
50	Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, 56, and 57 and enter the result.					
58		r the result.	o, and 37 and	\$	6,338.00	
59	enter	the result. Athly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and entertainty.		\$ \$		
	enter					
	Othe and wincom	athly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and en	ter the result. a, that are required from your current	for the	ıly	
59	Othe and wincom	Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form velfare of you and your family and that you contend should be an additional deduction ne under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page.	ter the result. a, that are required from your current	for the t month I reflect	401.00 health	
	Othe and wincom	Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form velfare of you and your family and that you contend should be an additional deduction ne under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses.	ter the result. a, that are required from your current All figures should	for the t month I reflect	401.00 health	
59	Othe and wincom avera	Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form velfare of you and your family and that you contend should be an additional deduction ne under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses.	ter the result. In, that are required from your current All figures should Monthly An	for the t month I reflect	401.00 health	
59	Othe and wincom avera	Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form velfare of you and your family and that you contend should be an additional deduction ne under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses.	n, that are required from your current All figures should Monthly Ar	for the t month I reflect	401.00 health	
59	Othe and wincom avera	Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form velfare of you and your family and that you contend should be an additional deduction ne under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses.	ter the result. a, that are required from your current All figures should Monthly Ar \$ \$ \$	for the t month I reflect	401.00 health	
59	Othe and wincom avera	Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form welfare of you and your family and that you contend should be an additional deduction ne under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page monthly expense for each item. Total the expenses. Expense Description	ter the result. a, that are required from your current All figures should Monthly Ar \$ \$ \$	for the t month I reflect	401.00 health	
59	Othe and wincom avera b. c.	Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form welfare of you and your family and that you contend should be an additional deduction ne under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses. Expense Description Total: Add Lines a, b and	ter the result. a, that are required from your current All figures should Monthly At \$ \$ \$ \$ \$ \$ \$	for the t month I reflect	health aly t your	
59	Othe and wincom avera b. c.	Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form velfare of you and your family and that you contend should be an additional deduction ne under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses. Expense Description Total: Add Lines a, b and Part VII. VERIFICATION lare under penalty of perjury that the information provided in this statement is true and	ter the result. a, that are required from your current All figures should Monthly At \$ \$ \$ \$ \$ \$ \$	for the t month I reflect	health aly t your	